Patient-Centered Medical Home Advisory Council Meeting Minutes March 07, 2012

Office of the Commissioner of Securities and Insurance (CSI) Conference Room, Helena and by phone

Members present

Paula Block, CHC-Montana Primary Care Association

Dr. Doug Carr, Billings Clinic

Dr. Paul Cook, Rocky Mountain Health Network **Dr. Janice Gomersall**, Montana Academy of Family Physicians

Dr. Jonathan Griffin, St. Peter's Medical Group **John Hoffland**, DPHHS Medicaid, Passport to Health

Kristin Juliar, Montana Office of Rural Health **Carol Kelley**, Bozeman Deaconess Internal Medicine Associates

Dr. Jay Larson, Independent Provider **Lisa Wilson**, Parents, Let's Unite for Kids-PLUK **Rick Yearry**, Regional Extension Center

Dr. Rob Stenger, Grant Creek Family Practice, St. Patrick's Hospital

Cindy Stergar, CHC-Butte Silver Bow Primary Care Clinic

Dr. Fred Olson, BCBS MT
Bob Olson, MHA
Cori Cook for Kirsten Mailloux, EBMS
Bernadette Roy, CHC-Partnership Health Center
JP Pujol, New West Health Services

Members absent

Dr. Deborah Agnew, Billings Clinic Pediatrician **Bill Pfingsten**, Bozeman Deaconess Health Group

Dr. Jerry Speer, Benefis Health System Claudia Stephens, Montana Migrant and Seasonal Farm Worker Council **Dr. Tom Roberts**, Western Montana Clinic **Todd Lovshin**, Allegiance Life and Health Company

Interested parties present

Will Robinson, NCQA
Janice Mackensen, Mountain Pacific Quality
Health
Dror Baruch, EBMS
Sarah Lane, President MT. Assoc. of
Naturopathic Physicians
Pat Murdo, Legislative Services
Dr. Scott Sears, St. Vincent Healthcare

CSI staff present

Christine Kaufmann Christina Goe Amanda Roccabruna Eby – Minutes Recorder

Council Chair, Dr. Carr called the meeting to order at 1:02pm

Roll Call, Agenda Review and approval of minutes from last meeting
 Dr. Fred Olson moved and Paula Block seconded a motion to adopt the minutes from the meeting on February 8^{th.} The motion passed unanimously.

2) Quality Metrics Subcommittee report

Subcommittee Chair, Dr. Griffin reported that the group was working in the background, but not holding meetings currently. The group is awaiting a new crosswalk tool being prepared by Mountain Pacific that will be useful in narrowing down its list of metrics. **Dr. Griffin called for a meeting on April 4th in conjunction with the full advisory Council**, when all believe the tool will be ready. He asked any other payers with quality measures for which they might provide incentive payments to be in touch with him. Medicaid discussed the HEDIS measures in their "healthy measures" program, but said there were not incentive payments in place.

Members of the group are also having conversations with HSM/Covisant. Notes from the last meeting are on the <u>web page</u>.

3) Discussion of provider education

Dr. Carr spoke on behalf of the education committee. He noted that they had just had a meeting and set the content and date for the first webinar [announced as March 22, but later changed to March 27th] Notes from their previous two meetings are available on the web page.

4) <u>Discussion of Bill Draft</u>

Members discussed the most recent bill draft and provided comments to CSI staff for a future draft. Discussion points included the following:

- New Section 1— (1) should be reworked and moved below (2).
 - Payers can and already do (a) and (b). If the bill fails, does it impact that ability?
 - (c) lumps several concepts together in a confusing way. Patients may need to elect to have medical information shared, but not to participate in a PCMH.
 PCMH is a practice change that benefits all patients (whether they elect it or not).
 Some parts of section 1 appear to be duplicated in other sections.
 - O (2) Discussion occurred on whether the commission is essential to the bill, or alternatively, a good-government, preferred policy. Could we do this without a commission? The alternative is to vest the program in a single agency, such as CSI or DPHHS. That has implications for transparency, political stability, and adequate representation by knowledgeable stakeholders. Members asked for indication on how much a Commission costs.
- New Section 2—(2) Group suggested that all language after "health benefit plan" could be stricken because the terms are defined more fully in (4)
 - (4)Group discussed the need for a broad catch-all term that would include all federal programs
 - (6)Group discussed the need to include PAs and geriatricians, and whether "licensed" was too broad, but did not reach conclusion. Suggested including "providing primary care" at the end.
- New Section 3—(7) Group suggested the commission be required to meet only 2 times a year.
- Group will consider and email suggestions for New Sections 4 and 5
- New Section 6—(1) seems like this subsection establishes the anti-trust provisions and duplicates Section 1.
 - (d) should be eliminated if possible. Same issue about enrolling and agreeing to participate as in Section 1
 - (2) Do we need something about evaluation using evidence-based standards?

Council Members were invited to submit additional comments by email. **CSI will produce a new draft by March 28.**

5) **Public Comment**

The public included Sarah Lane, Montana President of the Association of Naturopathic Physicians, Will Robinson of NQCA, and Pat Murdo of Legislative Services; they offered comments informally throughout the discussion. There was no additional public comment.

6) Review of work plan

This item was deferred to a future meeting

7) Additional agenda items

None

8) **Updates/Announcements**

NASHP TA State team leaders will be on a kick-off webinar on Friday. Dr. Carr will present the work of the Council

9) Schedule for 2012

a. April 4 (Helena)
b. May 2 (phone)
c. June 6 (Helena)
d. July –No meeting
e. August 1 (phone)
f. Sept. 5 (Helena)
g. October 3 (phone)
h. November 7 (Helena)
i. December 5 (phone)

The meeting adjourned at 3:50